

S38165  
P00 000007018

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(Requestor's Name)

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(Address)

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(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

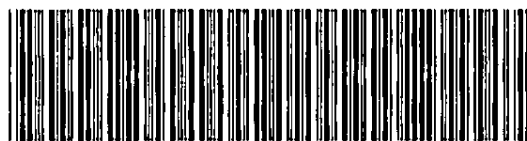
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

12/11/21  
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*Handwritten signature*



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

February 1, 2021

MITCHELL J RAUSHER  
8360 W OAKLAND PARK BLVD., 111  
SUNRISE, FL 33351

SUBJECT: RAUSHER AND HERMAN ENTERPRISES, INC.  
Ref. Number: P00000007018

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

IN ORDER TO FILE THE AMENDMENT FORM, YOU MUST FIRST COMPLETE THE REINSTATEMENT OF THE CORPORATION ONLINE AT SUNBIZ.ORG. YOU MAY CALL 850-245-6059 FOR REINSTATEMENT ASSISTANCE.

PLEASE REVIEW THE PRINTOUT FOR CORRECT OFFICER/DIRECTOR TITLES. PLEASE AMEND ACCORDINGLY AND RESUBMIT.

PLEASE COMPLETE THE FORM ATTACHED. YOU HAVE USED THE INCORRECT FORM.

The current name of the entity is as referenced above. Please correct your document accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Susan Tallent  
Regulatory Specialist II

Letter Number: 121A00002196

*I FILED INCORRECT FORM. THIS BUSINESS  
IS DISSOLVED. SEE ATTACHED FOR CORRECT  
FILING. FEE ALREADY PAID.*

[www.sunbiz.org](http://www.sunbiz.org)

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: RAUSHER AND HERMAN TAX & ACCOUNTING SERVICES INC

DOCUMENT NUMBER: \_\_\_\_\_

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

MITCHELL J RAUSHER

\_\_\_\_\_  
Name of Contact Person

RAUSHER AND ASSOCIATES INC

\_\_\_\_\_  
Firm/ Company

8360 W OAKLAND PARK BLVD., STE 111

\_\_\_\_\_  
Address

SUNRISE, FL 33351-7313

\_\_\_\_\_  
City/ State and Zip Code

mjrboca@aol.com

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MITCHELL J RAUSHER

\_\_\_\_\_  
Name of Contact Person

at ( 954 )

742-0299

\_\_\_\_\_  
Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

☐ \$35 Filing Fee

☐ \$43.75 Filing Fee &  
Certificate of Status

☐ \$43.75 Filing Fee &  
Certified Copy  
(Additional copy is  
enclosed)

☐ \$52.50 Filing Fee  
Certificate of Status  
Certified Copy  
(Additional Copy  
is enclosed)

**Mailing Address**

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address**

Amendment Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

Articles of Amendment  
to  
Articles of Incorporation  
of

RAUSHER AND HERMAN TAX & ACCOUNTING SERVICES INC.

(Name of Corporation as currently filed with the Florida Dept. of State)

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

**A. If amending name, enter the new name of the corporation:**

RAUSHER AND ASSOCIATES INC

*The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co." A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."*

**B. Enter new principal office address, if applicable:**

(Principal office address **MUST BE A STREET ADDRESS**)

**C. Enter new mailing address, if applicable:**

(Mailing address **MAY BE A POST OFFICE BOX**)

**D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:**

Name of New Registered Agent

(Florida street address)

New Registered Office Address:

(City)

Florida

(Zip Code)

**New Registered Agent's Signature, if changing Registered Agent:**

*I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.*

*Signature of New Registered Agent, if changing*

**Check if applicable**

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), F.S.



**E. If amending or adding additional Articles, enter change(s) here:**

*(Attach additional sheets, if necessary). (Be specific)*

N/A

**F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:**

*(if not applicable, indicate N/A)*

N/A

JANUARY 1, 2021

The date of each amendment(s) adoption: \_\_\_\_\_, if other than the date this document was signed.

Effective date if applicable: SAME  
(no more than 90 days after amendment file date)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

**Adoption of Amendment(s) (CHECK ONE)**

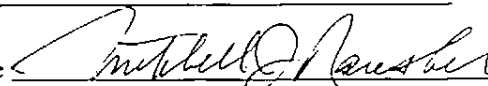
- ☒ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.
- ☒ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
- ☐ The amendment(s) was/were approved by the shareholders through voting groups. *The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):*

"The number of votes cast for the amendment(s) was/were sufficient for approval

by \_\_\_\_\_."  
(voting group)

Dated 2-5-2021

Signature



(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

MITCHELL J RAUSHER

\_\_\_\_\_  
(Typed or printed name of person signing)

PRESIDENT

\_\_\_\_\_  
(Title of person signing)